

60th Medical Group (AMC), Travis AFB, CA
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IACUC)
FINAL REPORT SUMMARY

(Please type all information. Use additional pages if necessary.)

PROTOCOL #: FDG20140003A

DATE: 30 August 2016

PROTOCOL TITLE: Clinical Procedures Training for Veterinary Technicians and Investigators using Common Laboratory Animal Species, including: Mice (*Mus musculus*), Rats (*Rattus norvegicus*), Hamsters (*Mesocricetus auratus*), Guinea Pigs (*Cavia porcellus*), Rabbits (*Oryctolagus cuniculus*), Ferrets (*Mustela putorius furo*), Pigs (*Sus scrofa*), Sheep (*Ovis aries*), and Goats (*Capra hircus*)

PRINCIPAL INVESTIGATOR (PI) / TRAINING COORDINATOR (TC): Dr. Kevin Grayson

DEPARTMENT: SGSE

PHONE #: 707-423-5096

INITIAL APPROVAL DATE: 14 November 2016

LAST TRIENNIAL REVISION DATE: 15 October 2015

FUNDING SOURCE: SG O&M funds

1. RECORD OF ANIMAL USAGE:

Animal Species:	Total # Approved	# Used this FY	Total # Used to Date
<i>Mus musculus</i>	Not to exceed 35yr (105 total)	1	1
<i>Sus scrofa</i>	Not to exceed 5yr (15 total)	1	2

2. PROTOCOL TYPE / CHARACTERISTICS: (Check all applicable terms in **EACH** column)

<input checked="" type="checkbox"/> Training: Live Animal	<input type="checkbox"/> Medical Readiness	<input type="checkbox"/> Prolonged Restraint
<input type="checkbox"/> Training: non-Live Animal	<input type="checkbox"/> Health Promotion	<input type="checkbox"/> Multiple Survival Surgery
<input type="checkbox"/> Research: Survival (chronic)	<input type="checkbox"/> Prevention	<input type="checkbox"/> Behavioral Study
<input type="checkbox"/> Research: non-Survival (acute)	<input type="checkbox"/> Utilization Mgt.	<input type="checkbox"/> Adjuvant Use
<input type="checkbox"/> Other ()	<input type="checkbox"/> Other (Treatment)	<input type="checkbox"/> Biohazard

3. PROTOCOL PAIN CATEGORY (USDA): (Check applicable) ☐ C ☒ D ☐ E

4. PROTOCOL STATUS:

***Request Protocol Closure:**

☐ Inactive, protocol never initiated

☐ Inactive, protocol initiated but has not/will not be completed

☒ Completed, all approved procedures/animal uses have been completed

5. Previous Amendments:

List all amendments made to the protocol.. IF none occurred, state **NONE**. Do not use N/A.

For the Entire Study Chronologically

Amendment Number	Date of Approval	Summary of the Change
None		

6. **FUNDING STATUS:** Funding allocated: \$7797.00

Funds remaining: \$ 0.00

7. **PROTOCOL PERSONNEL CHANGES:**

Have there been any personnel/staffing changes (PI/CI/AI/TC/Instructor) since the last IACUC approval of protocol, or annual review? ☐ Yes ☒ No

If yes, complete the following sections (Additions/Deletions). For additions, indicate whether or not the IACUC has approved this addition.

ADDITIONS: (Include Name, Protocol function - PI/CI/AI/TC/Instructor, IACUC approval - Yes/No)

DELETIONS: (Include Name, Protocol function - PI/CI/AI/TC/Instructor, Effective date of deletion)

8. **PROBLEMS / ADVERSE EVENTS:** Identify any problems or adverse events that have affected study progress. Itemize adverse events that have led to unanticipated animal illness, distress, injury, or death; and indicate whether or not these events were reported to the IACUC.

None.

9. **REDUCTION, REFINEMENT, OR REPLACEMENT OF ANIMAL USE:**

REPLACEMENT (ALTERNATIVES): Since the last IACUC approval, have alternatives to animal use become available that could be substituted in this protocol without adversely affecting study or training objectives?

No.

REFINEMENT: Since the last IACUC approval, have any study refinements been implemented to reduce the degree of pain or distress experienced by study animals, or have animals of lower phylogenetic status or sentience been identified as potential study/training models in this protocol?

No.

REDUCTION: Since the last IACUC approval, have any methods been identified to reduce the number of live animals used in this protocol?

None.

10. **PUBLICATIONS / PRESENTATIONS:** (List any scientific publications and/or presentations that have resulted from this protocol. Include pending/scheduled publications or presentations).

11. **Were the protocol objectives met, and how will the outcome or training benefit the DoD/USAF?**

Yes. This protocol helped the CIF fulfill the Animal Welfare Act mandate that all lab animal users be properly trained in clinical procedures in order to minimize animal pain and distress.

12. **PROTOCOL OUTCOME SUMMARY:** (Please provide, in "ABSTRACT" format, a summary of the protocol objectives, materials and methods, results - include tables/figures, and conclusions/applications.)

This protocol has been used to train veterinary technicians and one investigator on clinically useful procedures such as medication techniques and anesthesia methods for mice and pigs. A total of 4 hours of training were delivered to 3 students.


(PI / TC Signature)

12 Sep 16
(Date)

Attachments:

Attachment 1: Defense Technical Information Center (DTIC) Abstract Submission **(Mandatory)**

Attachment 1

Defense Technical Information Center (DTIC) Abstract Submission

This abstract requires a brief (no more than 200 words) factual summary of the most significant information in the following format: Objectives, Methods, Results, and Conclusion.

This protocol has been used to train veterinary technicians and one investigator on clinically useful procedures such as medication techniques and anesthesia methods for mice and pigs. A total of 4 hours of training were delivered to 3 students.

Grant Number: _____

From: _____

****If you utilized an external grant, please provide Grant # and where the grant came from. Thank you.**